Goddard Procedures and Guidelines

DIRECTIVE NO.	GPG 1410.1	**APPROVED BY Signature:**	
EFFECTIVE DATE:		**NAME**:	A. V. Diaz
EXPIRATION DATE:		**TITLE:**	Director

Responsible Office: 230/Logistics Management Division

Title: DIRECTIVES MANAGEMENT

Preface

P1. PURPOSE

This procedure establishes the process for the approval, issue, and control of GSFC policy and directives.

P2. APPLICABILITY

This procedure is applicable to all organizational elements, from Branch through Center and will be used to control all policies, procedures, and work instructions.

P3. AUTHORITY

NPG 1400.1, NASA Directives Management

P4. REFERENCES

a. NPG 1400.1, NASA Directives Management

b. GPG 1270.3, The GSFC Quality Manual

P5. CANCELLATION

GHB 1410.2, Management Directives Handbook

Procedure

1. DEFINITIONS

a. Approving Office - The head of an Approving Office signs its directives and its Directives Manager publishes them.

b. Directive - A policy, procedure, or work instruction that has been approved by the appropriate authority, published, and is controlled within the Center's document management system. Policies are approved only at the Center level.

1. Policy – A statement of executive management conviction and intention regarding an organization's goals and strategies for conducting its affairs.
2. Procedure - A documented description of how to perform an activity, including the procedure's purpose and scope; what shall be done and by whom; when, where, and how it shall be done; what materials, equipment, and documents shall be used; and how the activity shall be controlled and recorded.
3. Work Instruction – Detailed, usually brief, step-by-step documented instructions stating how to perform specific duties associated with an individual position or process.

c. Directive Initiation Form - A Directives Initiation Form is prepared by an Initiator to begin the process of creating or revising a directive.

d. Directive Management System - The Center procedure used to initiate, revise, draft, review, approve, and publish directives.

e. Directives Manager - Each organizational element will designate a person as its Directives Manager (e.g., Center, Directorate, Division/Project/Lab, Branch); the Directives Manager controls and publishes the documents which the organization approves.

f. Directive Review Form - The Directive Review Form contains the final draft directive as prepared by the Initiator and both reviewers' comments and their disposition.

g. Directive Working Group - A Directive Working Group is formed at the discretion of the Initiator or any Directives Manager to prepare drafts, perform reviews, and to consolidate or disposition comments. A Directive Working Group is not a required part of the GSFC Directives Management System.

h. Initiator - The Initiator is a Center employee who prepares and submits a Directives Initiation Form to his/her organization's Directives Manager. The Initiator also prepares and submits the Directive Review Form, including the preparation and revision of draft directives and the disposition of reviewer comments.

i. Office of Primary Responsibility - The Office of Primary Responsibility (OPR)is the organization with primary interest in a directive and its contents and must be either the same as the Approving Office or in the same chain of command.

j. Quality Management System Council (QMSC) – A group of Directorate representatives, chaired by the Quality Management System Representative (QMSR), responsible for advising the QMSR regarding Quality Management System administration, maintenance, status reporting, and corrective action.

2. IMPLEMENTATION

2.1 The Initiator prepares and submits a Directive Initiation Form to his/her organization's Directives Manager for review and approval.

2.2 If the Directives Manager determines that the subject of a Directive Initiation Form is the concern of another organization as the Office of Primary Responsibility (OPR), the Directives Manager shall forward it to the appropriate Directives Manager for coordination with the Initiator. The Directives Manager shall notify the Initiator of this action.

2.3 The OPR Directives Manager shall review the Directive Initiation Form. If it is approved, the initiator shall prepare and submit a Directive Review Form.

2.4 The OPR Directives Manager shall review and approve the Directive Review Form. Upon approval, it shall be forwarded to appropriate Center personnel and other Directives Mangers for review and comment.

Note: Center-level Directives (and proposed changes to same) which are associated with the GSFC Quality Management System, as identified in GPG 1270.3, must be reviewed by the GSFC QMSC prior to approval.

2.5 A Directives Manager who receives a Directive Review Form shall assign appropriate personnel in his/her organization as reviewers and consolidate their comments before returning the form to the sender (who may be either another Directives Manager or the Initiator).

2.6 If a Directives Manager who receives a Directive Review Form decides that it should be reviewed by another element of his/her organization, the Directive Review Form shall be forwarded to the appropriate Directives Manager(s) for processing in accordance with paragraph 5. Proposed changes to previously approved directives shall be reviewed and approved by the same functions/organizations that performed the original review and approval, unless specifically designated otherwise.

2.7 The Initiator dispositions reviewer comments and sends a Directive Review Form with a final draft to the OPR Directives Manager.

2.8 If the OPR is the Approving Office, the Directives Manager shall obtain approval of the Directive from the office head and publish it.

2.9 If the OPR is subordinate to the Approving Office, the OPR Directives Manager will forward the completed Directive Review Form to the Approving Office's Directives Manager, who shall obtain approval from the office head and publish it.

2.10 The Directives Manager of an Approving Office shall create and maintain a Master Document List of approved policies, procedures, and work instructions suitable for posting on the Internet. The List shall contain the following information as a minimum: document title; document number; document revision number; release date; and expiration date. With the potential exception of some work instructions, the text of all documents shall be posted in a PDF format and available through a hyperlink from the Master Document List. If the form of a work instruction prevents its posting as a PDF file on the Internet, the Master Document List shall either its location or the person to be contacted.

2.10.1 Obsolete documents retained for legal and/or knowledge preservation purposes shall be so identified on Master Document Lists. Any limitations on their continued application (e.g., Project application, hardware serial number effectivity, etc.) shall also be identified.

2.11 The Center Directives Manager shall maintain an Internet-based Center Master Directives List that contains all approved policies, procedures, and work instructions. Although the Center Master List shall contain the minimum information noted in paragraph 10 for all directives, the controlled copy of a Directorate or lower level directive may be kept in another location or electronic database that can be reached via a hyperlink.

2.12 Directives Identification

2.12.1 Center-Level Procedures – GSFC Procedures & Guidelines (GPG)

The Directives Manager shall assign document numbers and ensure they are consistent with the identification requirements of NPG 1400.1.

2.12.2 Directorate-Level Procedures – Procedures & Guidelines (PG)

Directorate-Level procedures shall be identified as DIR-PG- xxxx.y.z, where "DIR" is the highest level organization code to which the procedure applies, "xxxx.y" relates to the center-level GPG that is being addressed, and "z" is a sequential number to discriminate between procedures within a series. For example, Procedure 303-PG-8730.1.2 would be the second Code 300 PG document addressing GPG 8730.1 *Calibration and Metrology* within Code 303. Approved revisions shall be uniquely identified with a upper case letter suffix corresponding to Revision A, Revision B, etc.

2.12.3 Work Instructions (WI)

Work Instructions shall be identified as DIR-WI-xxxx.y.z, where "DIR" is the highest level organization code to which the work instruction applies, "xxxx.y" relates to the PG, or GPG if applicable, that is being addressed, and "z" is a sequential number to discriminate between procedures within a series. For example, Procedure 303-WI-8730.1.2 would be the second Code 300 Work Instruction addressing 303-PG-8730.1 Calibration and Metrology within Code 303. Approved revisions shall be uniquely identified with a upper case letter suffix corresponding to Revision A, Revision B, etc.

2.13 Directives Content and Format

2.13.1 GPG

GPG format and content shall be consistent with that described in NPG 1400.1.

2.13.2 PG

GPG's and PG's shall contain the following sections (section content may be N/A as indicated):

a. PURPOSE
b. REFERENCE – This section shall list and identify all documents which are either referenced in the body of the procedure or employ the subject procedure as a reference.
c. SCOPE
d. DEFINITIONS – Unless otherwise defined, quality assurance and management terms used in the procedure will be as defined in ISO 8402. (Section contents may be N/A, as appropriate)
e. IMPLEMENTATION – Detailed narrative defining the "who", "what", "when", and "how" of SLP implementation within the organization. This section shall also contain a process flowchart when the implementing process is complex enough to warrant clarification.
f. RECORDS – Identifies records (forms, lists, plans, etc.) which are maintained as objective evidence of procedure implementation. If not addressed in IMPLEMENTATION, the custodian of identified records shall be listed.

Procedures should generally be limited to the implementation of one process; a series of short, interrelated procedures is preferable to one lengthy procedure.

2.13.3 WI

Work Instructions shall be prepared as a procedure in instances where the lack of such a procedure may adversely affect the quality of a product. Work Instructions shall contain the following sections, some of which may be designated as "not applicable" to a particular instruction. Note that Work Instructions may consist of directions that are not in the form of a procedure, such as drawings, forms, or checklists. Such items shall be identified and controlled as Work Instructions.

a. PURPOSE
b. SCOPE
c. DEFINITIONS – Define only those terms unique to the activity/process being described
d. RECORDS, REPORTS, AND FORMS – Identify all records, reports, and/or forms used to implement or resulting from the Instruction and the records custodian(s).
e. SAFETY PRECAUTIONS AND WARNING NOTES – Provide applicable safety, caution, and warning notes. Identify instruction steps to which the notes apply.
f. REFERENCES
g. TOOLS, EQUIPMENT, AND MATERIALS – List specific/special tools, equipment, and materials required to perform the instruction. The list shall be detailed (e.g., serial numbers, lot date codes, etc.) to the degree necessary to perform the instruction in a satisfactory manner.
h. INSTRUCTIONS – In a step-by-step sequence, identify each action required to perform the task. For each step description, the following guidelines shall be considered:
    1. Identify special working conditions
    2. Identify requirements/specifications such as pressure, temperature, voltage settings, etc.
    3. Identify accept/reject criteria
    4. Identify data records or forms that must be completed
    5. Include aids that will help the user such as flow diagrams, checklists, diagrams, schematics, tables, etc.
i. FLOW DIAGRAM – Include if considered an aid in understanding the instruction.